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| <b>PATENT APPLICATION FEE DETERMINATION RECORD</b><br>Substitute for Form PTO-875   |   |                                  |                                    | Application or Docket Number<br><b>10/588,819</b> | Filing Date<br><b>07/02/2007</b> | <input type="checkbox"/> To be Mailed |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
|---|---|----------------------------------|------------------------------------|---|----------------------------------|---------------------------------------|-------------------------|--|------------|--|---------------------------------------|--|-------------------------|-------------------------|----------------------------------|-------------------|------------------------------------|---------------|------------------------------------|---------------------|---|-----|------------------------|-----|-------|--------|-----------|--|---------------------|------------------------------|-----|-------|--------|-----------|---|--------------|--|--|-----|--|--|--|---------------|--|--|--------|--|----|--|-----------|---|--|--------|-----------------|-----------------|---|---|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>APPLICATION AS FILED – PART I</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">(Column 1)</th> <th colspan="2">(Column 2)</th> <th colspan="2">SMALL ENTITY <input type="checkbox"/></th> <th>OTHER THAN SMALL ENTITY</th> </tr> </thead> <tbody> <tr> <td>FOR</td> <td>NUMBER FILED</td> <td>NUMBER EXTRA</td> <td></td> <td>RATE (\$)</td> <td>Fee (\$)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> BASIC FEE<br/>(37 CFR 1.16(a), (b), or (c))</td> <td>N/A</td> <td>N/A</td> <td></td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> SEARCH FEE<br/>(37 CFR 1.16(k), (l), or (m))</td> <td>N/A</td> <td>N/A</td> <td></td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> EXAMINATION FEE<br/>(37 CFR 1.16(o), (p), or (q))</td> <td>N/A</td> <td>N/A</td> <td></td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td>TOTAL CLAIMS<br/>(37 CFR 1.16(i))</td> <td>minus 20 =</td> <td>*</td> <td></td> <td>X \$ =</td> <td></td> <td>OR</td> </tr> <tr> <td>INDEPENDENT CLAIMS<br/>(37 CFR 1.16(h))</td> <td>minus 3 =</td> <td>*</td> <td></td> <td>X \$ =</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> APPLICATION SIZE FEE<br/>(37 CFR 1.16(s))</td> <td colspan="3">If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))</td> <td colspan="3"></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |   |                                  |                                    |   |                                  |                                       | (Column 1)              |  | (Column 2) |  | SMALL ENTITY <input type="checkbox"/> |  | OTHER THAN SMALL ENTITY | FOR                     | NUMBER FILED                     | NUMBER EXTRA      |                                    | RATE (\$)     | Fee (\$)                           |                     | <input type="checkbox"/> BASIC FEE<br>(37 CFR 1.16(a), (b), or (c)) | N/A | N/A                    |     | N/A   |        |           | <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(k), (l), or (m)) | N/A                 | N/A                          |     | N/A   |        |           | <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q)) | N/A          | N/A  |  | N/A |  |  | TOTAL CLAIMS<br>(37 CFR 1.16(i))   | minus 20 =    | *  |  | X \$ = |  | OR | INDEPENDENT CLAIMS<br>(37 CFR 1.16(h)) | minus 3 = | * |  | X \$ = |                 |                 | <input type="checkbox"/> APPLICATION SIZE FEE<br>(37 CFR 1.16(s)) | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |  |  |  |  |  | <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) |  |  |  |  |  |  |
| (Column 1)  |   | (Column 2)                       |                                    | SMALL ENTITY <input type="checkbox"/>             |                                  | OTHER THAN SMALL ENTITY               |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| FOR   | NUMBER FILED  | NUMBER EXTRA                     |                                    | RATE (\$)   | Fee (\$)                         |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> BASIC FEE<br>(37 CFR 1.16(a), (b), or (c))   | N/A   | N/A                              |                                    | N/A   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> SEARCH FEE<br>(37 CFR 1.16(k), (l), or (m))  | N/A   | N/A                              |                                    | N/A   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> EXAMINATION FEE<br>(37 CFR 1.16(o), (p), or (q))   | N/A   | N/A                              |                                    | N/A   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| TOTAL CLAIMS<br>(37 CFR 1.16(i))  | minus 20 =  | *                                |                                    | X \$ =  |                                  | OR                                    |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(h))  | minus 3 =   | *                                |                                    | X \$ =  |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
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| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))  |   |                                  |                                    |   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <small>* If the difference in column 1 is less than zero, enter "0" in column 2.</small>  |   |                                  |                                    |   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>APPLICATION AS AMENDED – PART II</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">(Column 1)</th> <th colspan="2">(Column 2)</th> <th colspan="2">(Column 3)</th> <th>SMALL ENTITY</th> <th>OTHER THAN SMALL ENTITY</th> </tr> </thead> <tbody> <tr> <td rowspan="2"><b>AMENDMENT</b></td> <td><b>01/29/2010</b></td> <td>CLAIMS REMAINING AFTER AMENDMENT</td> <td></td> <td>HIGHEST NUMBER PREVIOUSLY PAID FOR</td> <td>PRESENT EXTRA</td> <td></td> <td></td> </tr> <tr> <td>Total (37 CFR 1.16(i))</td> <td>* 3</td> <td>Minus</td> <td>** 20</td> <td>= 0</td> <td>RATE (\$)</td> <td>ADDITIONAL FEE (\$)</td> </tr> <tr> <td>Independent (37 CFR 1.16(h))</td> <td>* 3</td> <td>Minus</td> <td>***3</td> <td>= 0</td> <td>X \$ =</td> <td>OR X \$52= 0</td> </tr> <tr> <td><input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))</td> <td colspan="3"></td> <td></td> <td>X \$ =</td> <td>OR X \$220= 0</td> </tr> <tr> <td><input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))</td> <td colspan="3"></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td>TOTAL ADD'L FEE</td> <td>TOTAL ADD'L FEE</td> </tr> </tbody> </table>   |   |                                  |                                    |   |                                  |                                       | (Column 1)              |  | (Column 2) |  | (Column 3)                            |  | SMALL ENTITY            | OTHER THAN SMALL ENTITY | <b>AMENDMENT</b>                 | <b>01/29/2010</b> | CLAIMS REMAINING AFTER AMENDMENT   |               | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA       |   |     | Total (37 CFR 1.16(i)) | * 3 | Minus | ** 20  | = 0       | RATE (\$)  | ADDITIONAL FEE (\$) | Independent (37 CFR 1.16(h)) | * 3 | Minus | ***3   | = 0       | X \$ =  | OR X \$52= 0 | <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s)) |  |     |  |  | X \$ =   | OR X \$220= 0 | <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |  |        |  |    |  |           |   |  |        |                 |                 | TOTAL ADD'L FEE   | TOTAL ADD'L FEE   |  |  |  |  |  |  |  |  |  |  |  |  |
| (Column 1)  |   | (Column 2)                       |                                    | (Column 3)  |                                  | SMALL ENTITY                          | OTHER THAN SMALL ENTITY |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>AMENDMENT</b>  | <b>01/29/2010</b>   | CLAIMS REMAINING AFTER AMENDMENT |                                    | HIGHEST NUMBER PREVIOUSLY PAID FOR                | PRESENT EXTRA                    |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Total (37 CFR 1.16(i))  | * 3                              | Minus                              | ** 20   | = 0                              | RATE (\$)                             | ADDITIONAL FEE (\$)     |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| Independent (37 CFR 1.16(h))  | * 3   | Minus                            | ***3                               | = 0   | X \$ =                           | OR X \$52= 0                          |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))  |   |                                  |                                    |   | X \$ =                           | OR X \$220= 0                         |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |   |                                  |                                    |   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
|   |   |                                  |                                    |   | TOTAL ADD'L FEE                  | TOTAL ADD'L FEE                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
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| (Column 1)  |   | (Column 2)                       |                                    | (Column 3)  |                                  | AMENDMENT                             |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
|   | CLAIMS REMAINING AFTER AMENDMENT  |                                  | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA                                     | RATE (\$)                        | ADDITIONAL FEE (\$)                   |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| Total (37 CFR 1.16(i))  | *   | Minus                            | **                                 | =   | X \$ =                           | OR X \$ =                             |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| Independent (37 CFR 1.16(h))  | *   | Minus                            | ***                                | =   | X \$ =                           | OR X \$ =                             |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> Application Size Fee (37 CFR 1.16(s))  |   |                                  |                                    |   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |   |                                  |                                    |   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
|   |   |                                  |                                    |   | TOTAL ADD'L FEE                  | TOTAL ADD'L FEE                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| <small>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</small><br><small>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</small><br><small>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</small><br>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  |   |                                  |                                    |   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |
| Legal Instrument Examiner:<br>/Wanda A. Brown/  |   |                                  |                                    |   |                                  |                                       |                         |  |            |  |                                       |  |                         |                         |                                  |                   |                                    |               |                                    |                     |   |     |                        |     |       |        |           |  |                     |                              |     |       |        |           |   |              |  |  |     |  |  |  |               |  |  |        |  |    |  |           |   |  |        |                 |                 |   |   |  |  |  |  |  |  |  |  |  |  |  |  |

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